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CONFIRMATION NO. 7567

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|---|---|----------------------------|---|------------------------------------|
| SERIAL NUMBER 10/609,220 | FILING DATE 06/27/2003 RULE | CLASS 070 | GROUP ART UNIT 3676 | ATTORNEY DOCKET NO. 1199_001 |
| APPLICANTS Paul J. Amo, Middlesex, NY; <i>LB</i> | | | | |
| ** CONTINUING DATA ***** <i>NONE LB</i> | | | | |
| ** FOREIGN APPLICATIONS ***** <i>NONE LB</i> | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 09/25/2003 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged | | STATE OR COUNTRY NY | SHEETS DRAWING 11 | TOTAL CLAIMS 14 |
| Examiner's Signature <i>[Signature]</i> Initials <i>LB</i> | | INDEPENDENT CLAIMS 2 | | |
| ADDRESS 20874 WALL MARJAMA & BILINSKI 101 SOUTH SALINA STREET SUITE 400 SYRACUSE, NY 13202 | | | | |
| TITLE Handcuff restraint mechanism and method of use | | | | |
| FILING FEE RECEIVED 375 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |